SCHEDULE A (FEC Form 3X)

Use separate schedule(s)

FOR LINE	: PAGE	<u> 6</u>	OF 8			
(check only one)						
XX11a	11b	11c	12			
13	14	15	16	17		

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	XX11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statemor for commercial purposes, other than using the name		rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) INTERNATIONAL CHIROPRACTOR	RS ASSOCIATION POLIT	ICAL ACTION COMMITTEE
San Leandro FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General X Other (specify) Total committee donation	cupation of Chiropractic pregate Year-to-Date \$500.00	Date of Receipt 02 28 2011 Amount of Each Receipt this Period \$500.00
Detroit FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Agg	tate Zip Code MI 48205 Supation Octof of Chiropractic gregate Year-to-Date ▼ \$1,000.00	7
Boca Raton FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary Other (checkful)	tate FL Zip Code 33496 Supation ctor of Chiropractic gregate Year-to-Date ▼ \$1,000.00	<u> </u>
SUBTOTAL of Receipts This Page (optional)		

TOTAL This Period (last page this line number only).....

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